

Affidavit
For
Delegation of Parental Authority
Ala. Code § 26-2A-7

My name is: Kristen Box

My address is: 5656 Bryan Church Road
Dora, AL 35062

My telephone is: [REDACTED]

The name of the student for whom I am delegating parental responsibility is as follows:

Name of student: Taylor Brooke Aycock

Custodial Parent: I am the legal custodial parent of this student and I am authorized to execute this Delegation of Parental Authority and so indicate by my initials:

Yea, I am the legal custodial parent AB
(Initial or Sign)

Reasons for Delegation: Ala. Code § 26-2A-7 authorizes a custodial parent to delegate parental responsibility on a temporary basis where emergency or other compelling circumstances exist. A Delegation of Parental Authority is not appropriate to enable a student to zone jump from one school district to another.

Please explain in detail the emergency reasons or other compelling reasons why you are delegating rather than discharging your parental responsibilities:

I work a shift that doesn't allow me to pick up my children. I do
not have anyone to keep them for me until I get home.

(Use separate sheet if necessary)

Good Standing: Please state whether this student is in good standing (no outstanding disciplinary conditions) at the student's last school:

Yes, in good standing: KB
(Initial)

No, not in good standing: _____
(Initial)



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Shelby Cnty Judge of Probate, AL
07/12/2010 12:09:08 PM FILED/CERT

Expected duration of this Delegation of Parental Authority:

From: August 2010 To: June 2011

Kristen Box
(Signature)

STATE OF ALABAMA)
:)
Shelby COUNTY)

I, the undersigned, a notary public in and for said county in said state, hereby certify that Kristen Box, whose name is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of said instrument, he executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 7th day of July, 2010.

Sharon A. Lee
Notary Public

[NOTARIAL SEAL]

My commission expires: 2-22-12

ACCEPTANCE OF APPOINTMENT AS GUARDIAN

I/We, Vicki Higgins and _____,

the undersigned do hereby accept the appointment of Guardian of the person and property

of Taylor Brooke Aycok, a minor, age 11, under that certain

Delegation of Powers executed by Kristen Box dated the

7 day of July, 2010 I/We further represent that the residence of

said minor is 2064 Highview Way, Calera, AL 35040,

which is also my/our place of residence.

I/We further certify that I/we will, in my/our capacity as Guardian(s), comply with and perform my/our duties in the best interest of the minor child, all in accordance with Section 26-2A-7, Code of Alabama, 1988, and the Delegation of Powers hereinabove mentioned.

Vicki Higgins

STATE OF ALABAMA)
SHELBY COUNTY)

I, the undersigned, a Notary Public for said County and State, do hereby certify that Vicki Higgins, whose name is signed to the foregoing Delegation of Powers and who is known to me, acknowledged before me on this day that, being informed of the contents of said Delegation of Powers, he executed the same voluntarily on the day the same bears date.

Given under my hand and seal this the 7th day of July, 2010.

Sharon A. Lee

NOTARY PUBLIC

My Commission Expires: 2-22-12

(SEAL)

